MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.	FILING DATE
10/559,491	

APPLICANT(S)

10/559491

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1				51						
2		1		1			52						
3		1		1			53						
4		1		1			54						
5		1		1			55						
6		1					56						
7							57						
8	1		1				58						
9	1						59						
10	1		1				60						
11	1	1					61						
12		1					62						
13		1					63						
14		1					64						
15							65						
16	1						66						
17	1						67						
18	1						68						
19	1						69						
20	1						70						
21	1						71						
22	1						72						
23		1					73						
24		1					74						
25		1					75						
26		1					76						
27							77						
28							78						
29							79						
30							80						
31							81						
32							82						
33							83						
34							84						
35							85						
36							86						
37							87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	16		3				TOTAL IND.						
TOTAL DEP.	10		6				TOTAL DEP.						
TOTAL CLAIMS	26		9				TOTAL CLAIMS						

U.S. DEPARTMENT of COMMERCE